

PTO/SB/81 (11-04)

Approved for use through 11/30/2005. OMB 0851-0036

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Application Number	
Filing Date	
First Named Inventor	THEODOR GASSMANN, ET AL
Title	TRANSFER BOX WITH CROWN TEETH
Art Unit	
Examiner Name	
Attorney Docket Number	GKNG 1285 PCT

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	HEINZWILLI FUCHS	Date	12.7.06
Name	<i>Heinz Willi Fuchs</i>	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 2 forms are submitted.

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PTO/SB/01 (11-04)

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	THEODOR GASSMANN	Date	30.6.06
Name		Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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